

## REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

Mail Stop Reissue  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Attorney Docket No.	VILLAR-3R
First Named Inventor	Villar, J.C.
Original Patent Number	6,308,437 B1
Original Patent Issue Date (Month/Day/Year)	October 30, 2001
Express Mail Label No.	EU 549288728 US

## APPLICATION FOR REISSUE OF:

(Check applicable box)



Utility Patent



Design Patent



Plant Patent

## APPLICATION ELEMENTS (37 CFR 1.173)

1. ☒ Fee Transmittal Form (PTO/SB/56)  
(Submit an original, and a duplicate for fee processing)
2. ☒ Applicant claims small entity status. See 37 CFR 1.27.
3. ☒ Specification and Claims in double column copy of patent format  
(amended, if appropriate)
4. ☐ Drawing(s) (proposed amendments, if appropriate)
5. ☒ Reissue Oath/Declaration (original or copy)  
(37 CFR 1.175) (PTO/SB/51 or 52)
6. ☐ Power of Attorney
7. ☒ Original U.S. Patent currently assigned? ☐ Yes ☒ No  
(If Yes, check applicable box(es))  
☐ Written Consent of all Assignees (PTO/SB/53)  
☐ 37 CFR 3.73(b) Statement (PTO/SB/96)
8. ☐ CD-ROM or CD-R in duplicate, Computer Program (Appendix)  
or large table
9. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all of the following are necessary)
  - a. ☐ Computer Readable Form (CFR)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM (2 copies) or CD-R (2 copies); or
    - ii. ☐ paper
  - c. ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

10. ☐ Statement of status and support for all  
changes to the claims. See 37 CFR 1.173(c).
11. ☐ Original Patent Grant  
☐ Ribbioned Original Patent Grant  
☐ Statement of Loss (PTO/SB/55)
12. ☐ Foreign Priority Claim (35 U.S.C. 119)  
(if applicable)
13. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS  
Citations
14. ☐ English Translation of Reissue Oath/Declaration  
(if applicable)
15. ☒ Preliminary Amendment
16. ☐ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
17. Other: \_\_\_\_\_

## 18. CORRESPONDENCE ADDRESS



Customer Number:

OR



Correspondence address below

Name Juan C. Villar

Address 9365 Aegean Drive

City Boca Raton

State FL

Zip Code 33496

Country US

Telephone (561) 883-2812

Fax

Name (Print/Type) Juan C. Villar

Registration No. (Attorney/Agent)

34, 271

Signature

Date

October 30, 2003

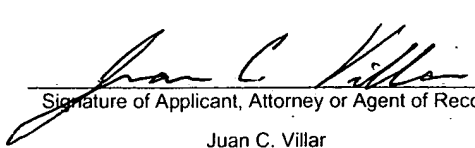
This collection of information is required by 37 CFR 1.173. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

17518 U.S. PTO  
10/697928

103003

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>REISSUE APPLICATION FEE TRANSMITTAL FORM</b>						Docket Number (Optional) VILLAR-3R		
<b>Claims as Filed – Part 1</b>								
	(1) Claims in Patent	(2) Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
Total Claims (37 CFR 1.16(j))	(A) 20	(B) 10	.... 10 =	x \$ 9 =	90	or	x \$ ____ =	
Independent claims (37 CFR 1.16(i))	(C) 4	(D) 2	* 2 =	x \$ 43 =	84		x \$ ____ =	
				Basic Fee (37 CFR 1.16(h))			\$ ____	
				Total Filing Fee			\$ 559.00 OR \$ ____	
<b>Claims as Amended – Part 2</b>								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	***	MINUS	**	* =	x \$ ____ =		x \$ ____ =	
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	=	x \$ ____ =		x \$ ____ =	
					Total Additional Fee		\$	OR \$
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B – A); if "A" is 20 or less, use (B – 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account Number _____ in the amount of _____. A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> The Director is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account Number _____. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ 559.00. _____ to cover the filing/additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p style="text-align: center;"><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p>October 30, 2003 _____ Date</p> <p>34.271 _____ Registration Number, if applicable</p> </div> <div style="width: 45%; text-align: right;"> <p> _____ Signature of Applicant, Attorney or Agent of Record</p> <p>Juan C. Villar _____ Typed or printed name.</p> </div> </div>								

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: **Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450**

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

UNITED STATES PATENT AND TRADEMARK OFFICE  
**CERTIFICATE OF CORRECTION**

PATENT NO. : 6,308,437 B1  
DATED : October 30, 2001  
INVENTOR(S) : Villar

Page 1 of 2

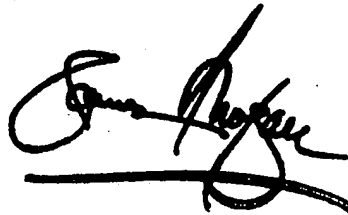
It is certified that error appears in the above-identified patent and that said Letters Patent is hereby corrected as shown below:

Title page.

The title page showing an illustrative figure, should be deleted and substitute therefor the attached title page.

Signed and Sealed this

Eighteenth Day of March, 2003

A handwritten signature in black ink, appearing to read "James E. Rogan", with a long horizontal stroke underneath.

JAMES E. ROGAN  
*Director of the United States Patent and Trademark Office*